

FEB 24 2012



Please type or print in ink.

2012 FEB 28 PM 3:24

BY: B. J. H.

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

Hagman

Curt

C

1. Office, Agency, or Court

Agency Name

State Assembly

Division, Board, Department, District, if applicable

60th AD

Your Position

Assemblyman

► If filing for multiple positions, list below or on an attachment.

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 13

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☒ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed February 24, 2012
(month, day, year)

Signature

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Curt Hagman

<p>▶ NAME OF BUSINESS ENTITY <u>Kelly Space and Technology</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Space, Technology and Homeland Defense</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>

Comments: _____

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>Curt Hagman</u>

▶ 1. BUSINESS ENTITY OR TRUST

Kuhr Properties LLC

Name

39 Oceanaire, Rancho Palos Verdes, CA 90275

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

 / / 11

ACQUIRED

 / / 11

DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship

☐ Partnership

☒ LLC

Other

YOUR BUSINESS POSITION Partner-Spouse

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☒ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☒ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

26378 South Vermont St. Harbor City, CA

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

 / / 11

ACQUIRED

 / / 11

DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Lemoli South LLC

Name

39 Oceanaire, Rancho Palos Verdes, CA 90275

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

 / / 11

ACQUIRED

 / / 11

DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship

☐ Partnership

☒ LLC

Other

YOUR BUSINESS POSITION Partner-Spouse

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☒ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☒ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

14501-14507 1/2 Lemoli Ave, Hawthorne, CA 90275

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

 / / 11

ACQUIRED

 / / 11

DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: Both LLC's are part of the Rein Kuhr & Diana Kuhr trust

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Curt Hagman

▶ 1. BUSINESS ENTITY OR TRUST

Apex Bail Bonds, Inc

Name

174 W. McKinley Ave, Pomona, CA 91709

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

____/____/11

ACQUIRED

____/____/11

DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship

☐ Partnership

☒ Corporation

Other

YOUR BUSINESS POSITION President

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499

☒ \$10,001 - \$100,000

☐ \$500 - \$1,000

☐ OVER \$100,000

☐ \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

Name of Business Entity, if Investment, or

Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

____/____/11

ACQUIRED

____/____/11

DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Genuine Technologies LLC

Name

6023 Avenue S. #231, Galveston, TX 77551

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

____/____/11

ACQUIRED

____/____/11

DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship

☐ Partnership

☒ Corporation

Other

YOUR BUSINESS POSITION President

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☒ \$0 - \$499

☐ \$10,001 - \$100,000

☐ \$500 - \$1,000

☐ OVER \$100,000

☐ \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

Name of Business Entity, if Investment, or

Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

____/____/11

ACQUIRED

____/____/11

DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

Curt Hagman

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

Vacant Land Parcel No. 303614101

CITY

San Bernardino County

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☒ Spouse, Ownership Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☒ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

Vacant Land - 2.8 Acres Mystic Canyon

CITY

Chino Hills Parcel 103318127000

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☒ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>Curt Hagman</u>

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
Vacant Land - Tejon View Approx 5 Acres

CITY
Tehachapi - Kern Co Assessor #401-260-24-00-9

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☒ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
174 W. McKinley Ave

CITY
Pomona, CA 91768

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Apex Bail Bonds, Inc

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None _____
HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None _____
HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Curt Hagman

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

4910 Oregon Ave

CITY

Long Beach, Ca 91709

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☒ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

26378 S. Vermont Ave

CITY

Harbor City, Ca

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ____/____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Curt Hagman

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
Vacant Land - Tejon View - Approx 25 Acres

CITY
Tehachapi - Kern C. Assessor #401-260-09-00-6

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000 _____/_____/11 _____/_____/11

☐ \$10,001 - \$100,000 _____/_____/11 _____/_____/11

☒ \$100,001 - \$1,000,000 ACQUIRED DISPOSED

☐ Over \$1,000,000

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ ☐ _____

 Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

NAME OF LENDER*		NAME OF LENDER*	
<hr/>		<hr/>	
ADDRESS (Business Address Acceptable)		ADDRESS (Business Address Acceptable)	
<hr/>		<hr/>	
BUSINESS ACTIVITY, IF ANY, OF LENDER		BUSINESS ACTIVITY, IF ANY, OF LENDER	
<hr/>		<hr/>	
INTEREST RATE	TERM (Months/Years)	INTEREST RATE	TERM (Months/Years)
<hr/> % <input type="checkbox"/> None	<hr/>	<hr/> % <input type="checkbox"/> None	<hr/>
HIGHEST BALANCE DURING REPORTING PERIOD		HIGHEST BALANCE DURING REPORTING PERIOD	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> Guarantor, if applicable		<input type="checkbox"/> Guarantor, if applicable	

FPPC Form 700 (2011/2012) Sch. B
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

Curt Hagman _____

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)		

BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
_____	<input type="checkbox"/> Real Property _____	
		Street address
HIGHEST BALANCE DURING REPORTING PERIOD		
<input type="checkbox"/> \$500 - \$1,000		
<input type="checkbox"/> \$1,001 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Guarantor _____	City
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	(Describe)

Comments: _____

SCHEDULE D Income – Gifts

Name

Curt Hagman

► NAME OF SOURCE

Building Industry Association, Baldy View Chapter

ADDRESS (Business Address Acceptable)

8711 Monroe Court, Suite B, Rancho Cucamonga*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 8 / 11	\$ 170.00	Reception/Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Airsoft GI

ADDRESS (Business Address Acceptable)

21077 Commerce Pointe Dr., Walnut, CA 91789

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7 / 19 / 11	\$ 26.40	Lunch
10 / 25 / 11	\$ 44.42	Lunch
10 / 27 / 11	\$ 199.00	Airsoft Gun

► NAME OF SOURCE

California Tribal Business Alliance

ADDRESS (Business Address Acceptable)

Address not applicable-All Donors under \$50.00

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 11 / 11	\$ 66.28	Reception/Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Council for Legislative Excellence

ADDRESS (Business Address Acceptable)

2150 River Plaza Dr, Ste 150, Sacramento CA 95833

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 / 8 / 11	\$ 75.45	Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE

California Rifle and Pistol Association, Inc

ADDRESS (Business Address Acceptable)

271 Imperial Highway, Ste 620, Fullerton, CA 92835

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 / 26 / 11	\$ 339.26	1851 Firearm
/ /	\$	
/ /	\$	

► NAME OF SOURCE

California Building Industry Association

ADDRESS (Business Address Acceptable)

1215 K Street, Suite 1200, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 26 / 11	\$ 406.48	Reception/Dinner
/ /	\$	
/ /	\$	

Comments: *(Cont.) CA 91730

SCHEDULE D Income – Gifts

Name

Curt Hagman

► NAME OF SOURCE

Disneyland Resort Government Relations

ADDRESS (Business Address Acceptable)

P.O. Box 3232, Anaheim, CA 92803

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 6 / 11	\$ 25.00	Lunch Ticket
12 / 3 / 11	\$ 374.29	Candlelight Ceremony
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

Farmer's Insurance Group

ADDRESS (Business Address Acceptable)

1201 K Street, Suite 1220, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5 / 31 / 11	\$ 200.00	Ticket to Roast
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

Miller Coors

ADDRESS (Business Address Acceptable)

411 East Wisconsin Ave, Milwaukee, WI 53202

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 6 / 11	\$ 37.48	Miller Coors Product
12 / 14 / 11	\$ 14.11	Lunch
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

Distilled Spirits Council of the US

ADDRESS (Business Address Acceptable)

1250 Eye St, N.W., Ste 400, Washington DC, 20005

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 12 / 11	\$ 405.80	Spirits
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

Los Angeles County Fair Association

ADDRESS (Business Address Acceptable)

1101 W. McKinley Ave., Pomona, CA 91768

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9 / 5 / 11	\$ 293.00	Concert Tickets
9 / 10 / 11	\$ 93.00	Admission/Parking
9 / 17 / 11	\$ 93.00*	Admission/Parking

► NAME OF SOURCE

Personal Insurance Federation of California

ADDRESS (Business Address Acceptable)

1201 K St, Ste 1220, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 5 / 11	\$ 17.20	Lunch
3 / 23 / 11	\$ 41.68	Reception
____ / ____ / ____	\$ _____	_____

Comments: *Reimbursed \$60

SCHEDULE D Income – Gifts

Name

Curt Hagman

► NAME OF SOURCE

Southern California Edison

ADDRESS (Business Address Acceptable)

2244 Walnut Grove Ave., Rosemead, CA 91770

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 20 / 11	\$ 8.25	Picture Frame
4 / 13 / 11	\$ 108.00	Kings Game Tickets
/ /	\$	

► NAME OF SOURCE

Supervisor Gary Ovitt

ADDRESS (Business Address Acceptable)

P.O. Box 1036, Ontario, CA 91762

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 / 27 / 11	\$ 260.00	Ca Sports Hall of Fame
/ /	\$	
/ /	\$	

► NAME OF SOURCE

San Manuel Band of Mission Indians

ADDRESS (Business Address Acceptable)

777 San Manuel Blvd, Highland, CA 92346

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7 / 14 / 11	\$ 300.00	Concert Tickets Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Specialty Equipment Market Association

ADDRESS (Business Address Acceptable)

1317 F. St. NW Ste. 500, Washington DC 20004

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 2 / 11	\$ 222.68	Dinner and Hotel
/ /	\$	
/ /	\$	

► NAME OF SOURCE

UCLA Office of the Chancellor

ADDRESS (Business Address Acceptable)

10920 Wilshire Blvd., Los Angeles, CA 90024

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 29 / 11	\$ 400.00	UCLA tickets
/ /	\$	
/ /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments:

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Curt Hagman

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

► NAME OF SOURCE

City of Los Angeles, Office of the Mayor

ADDRESS (Business Address Acceptable)

1400 K Street, Ste. 208

CITY AND STATE

Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

☐ 501 (c)(3)

Airport

DATE(S): 1 / 1 / 11 - 12 / 31 / 11 AMT: \$ 1,410.00
(If gift)

TYPE OF PAYMENT: (must check one) ☒ Gift ☐ Income

☐ Made a Speech/Participated in a Panel

☒ Other - Provide Description

Parking/Shuttle

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

☐ 501 (c)(3)

DATE(S): ____/____/____ - ____/____/____ AMT: \$____
(If gift)

TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

☐ 501 (c)(3)

DATE(S): ____/____/____ - ____/____/____ AMT: \$____
(If gift)

TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

☐ 501 (c)(3)

DATE(S): ____/____/____ - ____/____/____ AMT: \$____
(If gift)

TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

Comments: _____